

STANDARD LETTER OF REFERENCE

General Information

Mr./Ms. _____ has applied to the Public Works Contractors License Bureau to fulfill the requirements and obtain a license as a Construction Manager by the State of Idaho.

Among the requirements as a construction manager, the candidate must complete or have completed a minimum of four (4) years of verifiable, responsible-in-charge construction management experience. It is presumed that this experience, together with defined academic preparation or additional construction management experience in the construction industry will provide a basis for licensing at a minimum acceptable level of competency.

Your assistance in verifying the applicant's experience while under your direction or supervision is important to both the applicant and the State of Idaho. The following format is designed to help the Bureau evaluate whether or not the objective of the experience criterion are met. Please provide as complete and accurate information as possible using this form.

In some cases your point of reference may be a single project. In other cases, the responsibilities may cover several projects over a given time period. In the latter instance, please respond to the items as an aggregate of the applicant's responsibilities and functions for the referenced time period.

If you need assistance in completing this reference, please call the Public Works Contractors License Bureau. **Send the original, signed and notarized copy to:**

Public Works Contractors License Bureau
1090 E Watertower Street
Meridian ID 83642
Phone: 208-332-8968
Fax: 208-855-9666

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Name of Person Submitting Reference _____

Position/Title _____

Company _____

Address _____

City _____ State _____ Zip Code _____

Telephone (____) _____ Fax (____) _____

APPLICANT'S NAME _____

Professional relationship with the applicant:

____ Officer of employer firm _____ Direct supervisor _____ Other (please specify) _____

Your observations and opinions as to the applicant's capabilities to perform as a construction manager. (Please add pages as necessary.)

I attest that the information provided on this page and the following _____ pages to be factual, to the best of my knowledge.

Signature _____

Sworn to before me this _____ day of

_____, 20____

Residing at

Notary Public (Seal and Signature)

My commission expires on _____, 20____

Complete the following for each project or period of employment on which the applicant served that demonstrates his/her construction management experience. (Please add pages as necessary.)

Name of project to which this reference applies: _____

The applicant's position(s): _____

Time Period: _____

Name of Owner: _____

Name of Architect/Engineer _____

Name of Constructor: _____

Check the applicable specific duties of the candidate and briefly describe them.

_____ Health, Environmental and Safety Regulations

_____ Interpretation of Construction Contracts

_____ Financing

_____ Scheduling

_____ Project Administration

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